DLN: 93493319024526

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Form **990**

foundations)

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u> Open to Public Inspection

A F	or the 2015 ca	lendar year, or tax year beginning 0	1-01-2015 , and ending 12-31-201	5			
B Ch	eck if applicable	C Name of organization NATIONAL CABLE & TELECOMMUNICATION	NS ASSOC		D Employe	r identi	fication number
_	ddress change	% BETTYE COIL			53-022	2396	
	ame change nitial return	Doing business as					
FI FI	nal	Number and street (or B.O. hey if mail is	not delivered to street address) Room/suit	to	E Telephone	e numbei	r
	terminated nended return	25 MASSACHUSETTS AVE NW SUITE 100	s not delivered to street address) Room, sui	te	(202)2	22-239	90
Ap	plication pending	City or town, state or province, country, WASHINGTON, DC 20001	and ZIP or foreign postal code		G Gross red	eıpts \$ 8	4,840,067
		F Name and address of principal of	officer	H(a) Is th	ıs a group re	eturn fo	r
		MICHAEL POWELL 25 MASSACHUSETTS AVE NW 1 WASHINGTON, DC 20001	00	subo No	rdinates?		☐ Yes 🗸
I Ta	x-exempt status	501(c)(3) √ 501(c) (6) ◄ (inse	ert no) 4947(a)(1) or 527	inclu			□Yes □ No
J W	ebsite: ► WW	W NCTA COM			o," attach a ıp exemptıo	•	ee instructions)
K For	m of organization	✓ Corporation Trust Association	Other ►		rmation 1952		ate of legal domicile PA
Pa	rt I Sum	mary					
Activities & Governance	1 Briefly des	scribe the organization's mission or hission is to advance the Cable & Te ents to better serve the american pu	lecommunications industry's public	policy intere	est, and to p	romote	the industry's
/em	3 Charles			£	250/ -5		- 1 -
65	2 Check th	is box ▶ ┌ if the organization disco	ntinued its operations or disposed o	or more than a	25% OF ITS F	iet asse	ets
× 5 √		of voting members of the governing l	• •			3	26
MILE		of independent voting members of th mber of individuals employed in cale			_	5	113
Acti		nber of individuals employed in cale nber of volunteers (estimate if nece:			<u> </u>	6	0
		related business revenue from Part \			· · ⊢	7a	0
	b Net unrela	ated business taxable income from F	orm 990-T, line 34			7b	(
				Pric	r Year		Current Year
0.	8 Contri	butions and grants (Part VIII, line 1	h)		1,80		C
Ę	_	·					69,438,311
Ravenue		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					1,715,235
		revenue (Part VIII, Column (A), ime revenue—add lines 8 through 11 (m			19,72		6,801
	12)				71,517,55	_	71,160,347
		and similar amounts paid (Part IX,	, ,,		5,687,63		3,578,282
		ts paid to or for members (Part IX, on es, other compensation, employee b	, ,,			0	(
8	15 Saları 5–10)		enents (Part 1X, Column (A), lines		31,041,40	00	31,818,653
Expenses	16a Profes	ssional fundraising fees (Part IX, co	umn (A), line 11e)			0	C
ਲੁੱ	b Total fu	ındraısıng expenses (Part IX, column (D), lın	e 25) ▶ 0				
	17 Other	expenses (Part IX, column (A), line	s 11a-11d, 11f-24e)		37,756,62		35,853,068
		expenses Add lines 13-17 (must e			74,485,66		71,250,003
_ v	19 Reven	ue less expenses Subtract line 18	rrom line 12	•	-2,968,10	16	-89,656
Net Assets or Fund Balances				Beginning o	of Current Ye	ar	End of Year
SS &	20 Total	assets (Part X, line 16)			66,896,68	37	65,499,848
2 E		liabilities (Part X, line 26)		-	17,989,72	_	18,480,502
		sets or fund balances Subtract line	21 from line 20		48,906,96	53	47,019,346
Unde my k	r penalties of	ature Block perjury, I declare that I have examinate belief, it is true, correct, and comple nowledge					
	**** Signa	** * ature of officer			016-11-09 ate		
Sigr Her				Di			
	<u> Ditto</u>	CE CARNES Sr VP Fin & Admin or print name and title					
			reparer's signature Da	ate Che		TIN 0095751	n
Pai	d ₋		ARTILL O STILM	self	-employed	0033/31	
	parer	irm's name ► COHNREZNICK LLP irm's address ► 7501 WISCONSIN AVENUE 4	100E		n's EIN ► ne no (301) (552-9100)
Use	Only	BETHESDA, MD 208146583			(301)	>100	
—— May	the IRS discus	ss this return with the preparer show				. 🔽	Yes No

Form 990 (2015)

Par	t IV Checklist of Required Schedules			
			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	Yes	
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛂	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11 c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11 f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12 a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	Yes	
	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	990 (2015)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I.

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or gualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🗦 🕏

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Nο

Nο

Nο

Νo

Nο

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Yes

Form 990 (2015)

Pai	t V	Statements Regarding Other IRS Filings and Tax Compliance					_
		Check if Schedule O contains a response or note to any line in this Pa	art V			 Var	. Ni-
12	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1	1a	134		Yes	No
		· · · · · · · · · · · · · · · · · · ·	1b	0			
		e organization comply with backup withholding rules for reportable payments to v					
С		e organization comply with backup withholding rules for reportable payments to v g (gambling) winnings to prize winners?	• • •		1c	Yes	
2a		the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered s return	2a	113			
b		east one is reported on line 2a, did the organization file all required federal emplo			2b	Yes	
_		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (s					
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during t	the ye	ar ⁷	3a		No
b	If "Yes	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	ın Sch	hedule O	3b		
4a		time during the calendar year, did the organization have an interest in, or a sign					
		a financial account in a foreign country (such as a bank account, securities acco nt)?	ount, o	r otner financial	4a		No
b	If"Ve	s," enter the name of the foreign country					
	See in	structions for filing requirements for FinCEN Form 114, Report of Foreign Bank a	and Fi	nancial Accounts			
	(FBAR						
		he organization a party to a prohibited tax shelter transaction at any time during		 	5a		No
b	Did an	ly taxable party notify the organization that it was or is a party to a prohibited tax	x shel	ter transaction?	5b		No
c	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?			5c		
62	Does	the organization have annual gross receipts that are normally greater than \$100	0.000	and did the	6a		No
00		zation solicit any contributions that were not tax deductible as charitable contrib			0.		
b		s," did the organization include with every solicitation an express statement that	tsuch	contributions or gifts	6b		
7		not tax deductible?	•		OD		
	_	e organization receive a payment in excess of \$75 made partly as a contribution	n and i	partly for goods and	7a		
		es provided to the payor?					
		s," did the organization notify the donor of the value of the goods or services prov		l-	7b		
С		e organization sell, exchange, or otherwise dispose of tangible personal property rm 8282?		hich it was required to	7 c		
d		1	7d				
е	Did th	e organization receive any funds, directly or indirectly, to pay premiums on a per	rsonal	benefit contract?	7e		
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a persona	ıal ben	nefit contract?	7f		
g		organization received a contribution of qualified intellectual property, did the orga	janızat	tion file Form 8899 as	_ [
.	require	ed?	· did th	o organization file a	/g		
"		1098-C?		· · · · ·	7h		
8	-	oring organizations maintaining donor advised funds.	,				
		donor advised fund maintained by the sponsoring organization have excess busing the year?	ness r	nolaings at any time	8		
9a		e sponsoring organization make any taxable distributions under section 4966?			9a		
		e sponsoring organization make a distribution to a donor, donor advisor, or relate		son?	9b		
10	Sectio	n 501(c)(7) organizations. Enter					
а	Initiat	tion fees and capital contributions included on Part VIII, line 12 <u>1</u>	.0a				
b		· · · · · · · · · · · · · · · · · · ·	. 0 b				
11	faciliti Sectio	es on 501(c)(12) organizations. Enter		I			
			1a				
		income from other sources (Do not net amounts due or paid to other sources					
	agains	st amounts due or received from them)	.1b				
12a	Sectio	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	n lieu	of Form 1041?	12 a		
b		s," enter the amount of tax-exempt interest received or accrued during the	L 2 b				
13	year Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
	Jectio	222(2)(22) quainica nonprofit ficaltif filodiance isoucis.					
а		organization licensed to issue qualified health plans in more than one state? Not	t e. Se	e the instructions for			
L		onal information the organization must report on Schedule O	ı	-	13a		
D		the amount of reserves the organization is required to maintain by the states the the organization is licensed to issue qualified health plans	.3b				
c	Enter	the amount of reserves on hand	L3c				
14a	Did th	e organization receive any payments for indoor tanning services during the tax y	ear?		14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? <i>If "No," provide an explanatio</i>	on in S	Schedule O	14b		

Form 990 (2015) Page 6 Governance, Management, and Disclosure Part VI For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax 1a 26 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are ındependent 1b 2.5 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Νo Did the organization have members or stockholders? 6 Yes 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Yes Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes **b** Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Νo **10a** Did the organization have local chapters, branches, or affiliates? . . **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12h Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes 13 Yes Did the organization have a written document retention and destruction policy? . . . 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Yes 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a **16**a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
 - Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

organization's exempt status with respect to such arrangements?

- interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records

 BETTYE COIL 25 MASSACHUSETTS AVE NW SUITE 100 WASHINGTON, DC 200011431 (202) 222-2393

16b

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 - in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	` MISC)	organization and related organizations
See Additional Data Table										

(A) Name and Title	(B) A verage hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total						<u> </u>				
c Total from continuation sh neets to Part VII, S									
d Total (add lines 1b and 1c))					▶		13,615,963	0	1,724,389

Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee 3 Νo For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Νo

Section B. Independent Contractors		
Complete this table for your five highest compensated independent compensation from the organization. Report compensation for the ca	• • •	
(A) Name and business address	(B) Description of services	(C) Compensation
T-C REPUBLIC SQUARE OWNER, PO BOX 419078 BOSTON, MA 02241	PROPERTY MANAGEMENT	2,568,647
CENTURY STRATEGIES, 3414 PEACHTREE ROAD NE 1080 ATLANTA, GA 30326	LEGAL SERVICES	2,656,139
FREEMAN COMPANIES, PO BOX 650036 DALLAS, TX 75265	CONVENTION SERVICES	3,032,421
POSSIBLE WORLDWIDE LLC, PO BOX 8500 BOX 4356 PHILADELPHIA, PA 19178	ADVERTISING SERVICES	2,971,374
LMG INC, 1050 CONNECTICUT AVENUE NW 1080 WASHINGTON, DC 20036	PROFESSIONAL Svcs	1,503,212
2 Total number of independent contractors (including but not limited to \$100,000 of compensation from the organization ▶ 41	those listed above) who received more than	

Form 99		<u> </u>						Page 9
Part V	1111	Statement o						_
		Check If Schedi	ule O contains a respoi	nse or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s	1a	Federated cam	paigns 1a					
Grants	ь	Membership du	es 1b					
	С	Fundraising eve	ents 1c					
ifts. ar A	d	Related organiz	rations 1d					
 ⊒	e	Government grants	s (contributions) 1e					
ons Si	f	All other contribution	ons, gifts, grants, and 1f					
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts no	ot included above ons included in lines					
a di	g	1a-1f \$	ons included in lines					
Cont	h	Total. Add lines	s 1a-1f		0			
<u> </u>				Business Code				
Ve n	2a	MEMBERSHIP DUE		900099	62,893,065	62,893,065		
γ. g	b c	CONVENTION INCO	JME	900099	6,545,246	6,545,246		
Z L	d							
3å ⊂	е							
Program Service Revenue	f	All other progra	am service revenue					
Ě	g	Total. Add lines	s 2a-2f		69,438,311			
	3	Investment inc	ome (including dividen	ds, interest,	1,232,037			1,232,037
	4	and other similar	ar amounts)	-	0			1,202,007
	5	Royalties		▶	0			
	_	_	(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)	_	0			
	7a	Gross amount	(ı) Securities	(II) O ther				
		from sales of assets other than inventory	14,161,703	1,215				
	b	Less cost or other basis and	13,669,944	9,776				
	c	sales expenses Gain or (loss)	491,759	-8,561				
	d	Net gain or (los	s)		483,198			483,198
enne	8a	Gross income f events (not inc \$	luding 					
Other Revenue		See Part IV, lin	a					
Off	b c		penses b (loss) from fundraising	events	0			
		Gross income f	rom gaming activities ne 19					
			a penses b (loss) from gaming acti	vities	0			
		Gross sales of		•				
		returns and allo	owances .					
			oods sold b (loss) from sales of inv	entory	0			
		Miscellaneous	· · · · · · · · · · · · · · · · · · ·	Business Code	S			
	11a	MISCELLANEC		900099	6,801	6,801		
	b							
	С							
	d e	All other revenue Total. Add lines		•				
	12				6,801			
	12	rocai revenue.	See Instructions .	· · · · •	71,160,347	69,445,112		1,715,235

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$) organizations must complete al.	I columns All other organizations	must complete column (A

Check if Schedule O contains a response or note to ar	any line in this Part IX							

		1			
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and				
	domestic governments See Part IV, line 21	3,553,282			
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	25,000			
3	Grants and other assistance to foreign organizations, foreign				
	governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and				
	key employees	11,857,416			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons				
	described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	16,031,731			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,475,033			
9	Other employee benefits	1,442,077			
10	Payroll taxes				
		1,012,396			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	7,817,853			
С	Accounting	163,671			
d	Lobbying	4,966,481			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	175,050			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,790,279			
12	Advertising and promotion	1,542,162			
13	Office expenses	799,703			
14	Information technology	632,195			
15	Royalties	0			
16	Occupancy	3,677,673			
17	Travel	917,374			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	8,002,080			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,373,431			
23	Insurance	40,248			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	STATE AND LOCAL TAXES	143,510			
b	DUES & SUBSCRIPTIONS	552,587			
c	REPAIRS & MAINTENANCE	57,430			
d	MISCELLANEOUS	201,341			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	71,250,003			
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015)

1

2

3

4

5

6

7

8

9

10a

b

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

Net Assets or Fund Balances

(A) (B)

10a

10b

Part X	Balance Sheet
	Check if Schedule O cor

Cash-non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net .

Notes and loans receivable, net . .

Prepaid expenses and deferred charges

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets.Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

Secured mortgages and notes payable to unrelated third parties

Organizations that do not follow SFAS 117 (ASC 958), check here

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

lines 27 through 29, and lines 33 and 34.

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complete

Inventories for sale or use .

Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Less accumulated depreciation . Investments—publicly traded securities .

Accounts receivable, net . .

Schedule L .

II of Schedule L

Grants payable

Deferred revenue

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets . .

complete lines 30 through 34.

Total net assets or fund balances

Temporarily restricted net assets

Permanently restricted net assets

Balance Sheet				
Check if Schedule O contains a response or note to any line in this Part X				

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part

Page

End of year

Beginning of year

1,501,486

6,210,292

0

1

2

3

4

5

6

7

8

9

10c

11

12

13

15

16

17

19

20

21

22

23

24

25

26

27

28

30

31

32

33

0

0

1,042,525

5,225,378

49, 165, 864

3,738,862

n

0 14

0 18

0

0

0

0

4,381,514

17,989,724

48,906,963

48.906.963

66,896,687

0

0

12,280

66,896,687

8,942,749

4,665,461

13,612,150

9,511,569

11

905,064

5,010,640

0

0

0

1,598,484

4,100,581

49,632,326

4,243,058

n

0

0

0

0

0

0

4.522.944

18,480,502

47,019,346

47.019.346

65,499,848

Form 990 (2015)

0

0

9,695

65,499,848

9,298,175

4,659,383

basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Separate basis

Schedule O

b Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

Total revenue (must equal i art viii, column (A), mie 12)	1								
Total expenses (must equal Part IX, column (A), line 25)	2	Ī							
Revenue less expenses Subtract line 2 from line 1	3	Ī							
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))									
Net unrealized gains (losses) on investments	5	I							
Donated services and use of facilities	6								
Investment expenses		١							

Page **12**

71,160,347

71,250,003

48,906,963

2b

2c

3a

3b

Yes

Yes

Nο

Form 990 (2015)

-89,656

		5	-1,797,961
6	Donated services and use of facilities		
		6	
7	Investment expenses		
		7	
8	Prior period adjustments		
		8	

•		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))		47,0		
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				

column (B))		10		47,0	19,346	
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				. [
					Yes	No
1		organization changed its method of accounting from a prior year or checked "Other," explain in ule O	-			
2a	Were t	the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
		,'check a box below to indicate whether the financial statements for the year were compiled or review arate basis, consolidated basis, or both	wed on			
	Γs	Separate basis Consolidated basis Both consolidated and separate basis				

Both consolidated and separate basis

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Software ID: Software Version:

EIN: 53-0222396

Name: NATIONAL CABLE & TELECOMMUNICATIONS ASSOC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099-Highest employe organization Individual organizations Institutional MISC) MISC) and related r director below organizations employee dotted line) t compenso trustee Trustee i i i i i i 40 0 MICHAEL K POWELL 4.120.398 0 524.804 PRESIDENT & CEO 5 0 10 **NEIL SMIT** Х Х 0 0 CHAIRMAN 2 0 10 THOMAS M RUTLEDGE Х Χ 0 0 VICE-CHAIRMAN 2 0 10 PATRICK ESSER Х Χ 0 0 TREASURER 2 0 1 0 Rocco B Commisso 0 0 Director 2 0 10 Frank M Drendel 0 director 2.0 10 Ronald Duncan Х 0 0 director 20 10 John D Evans 0 director 2 0 1.0 JOHN D SKIPPER X 0 Х 0 SECRETARY 2 0 10 PETER RICE 0 director 2 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	han erso cer tor/t	not one n is and trus	tee)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
STEVE MIRON	1 0								
dırector	2.0	X					0	0	0
	20								
MATTHEW C BLANK		l x					0	0	0
Director	2 0	'`					Ĭ	Ĭ	
Gary Shorman	1 0								
		Х					0	0	0
director	2 0								
Richard Sjoberg	1 0								
dırector		X					0	0	0
	2 0								
Robert J Stanzione	1 0	l x					0	0	
dırector	2 0	^						0	
David M Zaslav	10				\vdash				
David M Zasiav		x					0	0	0
director	2 0								
PHILIPPE P DAUMAN	1 0								
Jun abou		Х					0	0	0
director	2 0								
Ken Lowe	1 0	l x					0	0	_
dırector	2 0	^							
PAT MCADARAGH	10								
		х					0	0	0
director	2 0								

2 0

ALFRED LIGGINS III

director

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

75,672

242,040

85,720

70,720

0

558,349

1,223,203

805,113

752,768

Compensated Employees, and Independent Contractors													
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos m unles	ition ore t ss pe	(C (do han erso cer tor/t	not one n is and trus	tee)		(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the			
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations			
BRIAN L ROBERTS	1 0												
dırector	2 0	×						0	U	[
BRIAN SWEENEY	1 0												
DIRECTOR	2 0	X						0	0				
ROBERT D MARCUS	1 0												
DIRECTOR	2 0	×						0	0				
JEFFREY S DEMOND	1 0							_	_				
DIRECTOR	2 0	X						U	0				
JOHN K MARTIN	1 0												
DIRECTOR	2 0	X						0	0	(
NANCY DUBUC	1 0												
DIRECTOR	2 0	X						0	0	(
BRUCE CARNES	45 0												

0 0 45 0

0 0

Χ

Χ

JAMES M ASSEY JR

BARBARA YORK

ELEANOR WINTER

SR VP , FINANCE & ADMIN

Executive Vice President

SR VP , Industry Affairs

SR VP , Special Projects

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

74,158

65,720

54,624

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe offi direc	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
RITA LEWIS SR VP , GOVERNMENT RELATIONS	45 0				x			800,741	0	97,343	
RICK CHESSEN SR VP , LAW & REGULATORY POL	45 0				х			798,360	0	80,378	
JADWIGA JANUCIK SR VP , ASSOCIATION AFFAIRS	45 0				х			610,167	0	67,343	
ROBERT STODDARD SR VP COMM & PUBLIC AFFAIRS	45 0				х			547,651	0	70,720	
Khristian Snowden Chief of Staff	45 0				х			731,175	0	69,921	
NEAL GOLDBERG VP & GENERAL COUNSEL	45 0					х		592,690	0	70,686	
JILL LUCKETT SR VP , PROG NETWORK POLICY	45 0					х		544,521	0	74,540	

45 0

0 0 45 0

0 0

Χ

Χ

541,971

473,919

514,937

WILLIAM CHECK

DIANE BURSTEIN

MICHAEL SCHOOLER

CTO & SR VP , SCIENCE & TECH

VP & DEPUTY GENERAL COUNSEL

VP & DEPUTY GENERAL COUNSEL

DLN: 93493319024526

Employer identification number

☐ Yes

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Was a correction made?

NATIONAL CABLE & TELECOMMUNICATIONS ASSOC

Internal Revenue

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

OMB No 1545-0047 Open to Public Inspection

Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then

www.irs.gov/form990.

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

ii the organization answered tes on Form 990, Part IV, Line 5 (Proxy	rax) (see separate instructions) or Form 990-EZ, Part v
line 35c (Proxy Tax) (see separate instructions), then	
- Continue FO1(a)(4) (5) or (6) organizations. Complete Port III	

		53-022	2396)			
Par	t I-A	1 52	7 or	ganizatio	n.		
1	Provi	de a description of the organization's direct and indirect political campaign activities in Part IV					
2	Politi	cal expenditures		\$_			
3	Volui	nteer hours		_			
Par	t I-B	Complete if the organization is exempt under section 501(c)(3).					_
1	Ente	the amount of any excise tax incurred by the organization under section 4955	>	\$_			
2	Ente	the amount of any excise tax incurred by organization managers under section 4955	>	\$_			
3	Ifthe	organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	□ No	

- If "Yes," describe in Part IV
- Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527
- exempt function activities
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 3
- Did the filing organization file Form 1120-POL for this year? √ Yes
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter - 0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) DEMOCRATIC A G ASSOCIATION	1580 LINCOLN ST 1125 DENVER,CO 80203	13-4220019	15,000	
(2) Republican A G Association	1747 Penn Ave NW800 Washington, DC 20006	46-4501717	15,000	
(3) NAT'L CONFERENCE OF DEMOCRATIC MAYORS	1660 L STREET NW501 WASHINGTON,DC 20036	52-1535470	7,500	
(4) COMMUNITY LEADERS OF AMERICA	PO Box 4977 Glen Allen, VA 23058	46-3149989	5,000	
5				
6				

Subtract line 1g from line 1a $\,$ If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

10	nedule (, (F	orm 990 or 990-E2) 2015			Page 2
P	art II-	Α	Complete if the organization is exempt under section $501(c)(3)$ and under section $501(h)$.	file	ed Form 5768	(election
١.	Check	>	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated expenses, and share of excess lobbying expenditures)	l gro	up member's nar	ne, address, EIN
3	Check	•	If the filing organization checked box A and "limited control" provisions apply			
			Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	lobby	ng)	oying expenditures to influence public opinion (grass roots			

		Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) ying expenditures to influence public opinion (grass roots									
a	Total lobbying expenditures to influence public lobbying)	opinion (grass roots			•						
b	Total lobbying expenditures to influence a legi	slative body (direct lobbying)									
c	Total lobbying expenditures (add lines $1a$ and	1b)									
d	Other exempt purpose expenditures										
e	Total exempt purpose expenditures (add lines	1c and 1d)									
f	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns									
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:									
	Not over \$500,000	20% of the amount on line 1e									
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000									
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000									
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000									
	Over \$17,000,000	\$1,000,000									

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)									
Lobbying Expe	nditures During	4-Year Avera	ging Period						
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total				
Lobbying nontaxable amount									
Lobbying ceiling amount (150% of line 2a, column(e))									
Total lobbying expenditures									
Grassroots nontaxable amount									
Grassroots ceiling amount (150% of line 2d, column (e))									
Grassroots lobbying expenditures									
	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))	Calendar year (or fiscal year beginning in) Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e)) Grassroots lobbying expenditures	Calendar year (or fiscal year beginning in) (a)2012 (b)2013 (c)2014 (d)2015 Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e))				

Return Reference

r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying					
each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		a)		(b)	
tivity		No	Am	ount	
	Yes		 I		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i					
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
art III-A Complete if the organization is exempt under section 501(c)(4), section 50501(c)(6).	01 (c)(5), c	r sec	tion	
		_		es	No
Were substantially all (90% or more) dues received nondeductible by members?			1	-	Νo
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	-	Νo
B Did the organization agree to carry over lobbying and political expenditures from the prior year?				es	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."	lo" C		Part 1	III-A	۹,
L Dues, assessments and similar amounts from members	1		62	,893,	,065
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	3-		4.2	000	0.04
a Current year	2a			,980,	
b Carryover from last year	2b			,119,	
c Total	2c			,860,	
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3		14	,144	,650
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5 Taxable amount of lobbying and political expenditures (see instructions)	5		- 3	,284,	,47:
Part IV Supplemental Information					

Explanation

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE D

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at $\underline{www.irs.gov/form990}$.

2015

DLN: 93493319024526

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Employer identification number Name of the organization NATIONAL CABLE & TELECOMMUNICATIONS ASSOC 53-0222396 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶_ Number of states where property subject to conservation easement is located ▶_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the A mount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) (B)(I) and section 170(h)(4)(B)(II)? ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
 - If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenue included on Form 990, Part VIII, line 1
 - (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D Schedule D (Form 990) 2015

Pai	t III	Organizations Maintaining (continued)	Collections of Ar	t, Historical	Trea	asures, or	Oth	ner Similar A	sset	:s	. 490
3	-	g the organization's acquisition, accortion items (check all that apply)	ession, and other recor	ds, check any	of the	following that	t are	a significant us	e of i	īs	
а		Public exhibition		d	an or	exchange pro	ogra	ms			
b	Г	Scholarly research		e	ther						
c		Preservation for future generations									
4	Provi Part)	de a description of the organization' KIII	s collections and expla	in how they fur	ther t	he organizatio	on's	exempt purpose	ın		
5		g the year, did the organization solic s to be sold to raise funds rather th						ımılar 🗆 Ye :	5	□ No	
Pa	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		orm 990, Par	t IV,	line 9, or re	epo	rted an amour	ıt on	Forn	າ 990,
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	todian or other interm	ediary for contr	ibutio	ns or other as	sset	s not	5	□ No	
b	If'	'Yes," explain the arrangement in Pa	art XIII and complete	he following tal	hle		Г	Am	ount		
c		ginning balance	are XIII and complete	ine following tal	DIC	1	. F				
d		ditions during the year				1	-				
e		stributions during the year				1					
f		ding balance				_	f				
2 a		unig balance ne organization include an amount o	n Form 990, Part X, lın	e 21, for escro	worc			liability? Ye e	5	No	
ь	Ιf"Υ∈	es," explain the arrangement in Part	XIII Check here if the	e explanation h	as bee	en provided ir	ı Pai	rt XIII			
Pa	rt V	Endowment Funds. Comple									
		<u>'</u>	(a)Current year	(b)Pnor year			-)Three years back		our ye	ars back
1 a	Begii	nning of year balance									
b	C ont	ributions • • • • • • •									
c	Net i losse	nvestment earnings, gains, and es									
d	Gran	ts or scholarships									
е		r expenditures for facilities programs									
f	A dm	inistrative expenses									
g		of year balance									
2	Provi	de the estimated percentage of the	current vear end balan	ce (line 1a. coli	umn (a)) held as					
- а		i designated or quasi-endowment	carrency car ena baran	ee (iiiie 19, eei	a (a)) Hela as					
_		-									
b		anent endowment ▶									
c	•	percentages on lines 2a, 2b, and 2c	should equal 100%								
3а		here endowment funds not in the pos	ssession of the organiz	ation that are h	neld ai	nd administer	ed f	or the	_		
	_	iization by irelated organizations						3-	(i)	Yes	No
		elated organizations			•	•			(ii)		
b		es" on 3a(ii), are the related organiz		d on Schedule	 R? .	·			Bb		
4	Desc	ribe in Part XIII the intended uses o	of the organization's er	dowment funds							
Pa	rt VI	Land, Buildings, and Equip	ment.								
		Complete if the organization a	answered 'Yes' to Fo		IV, I		Fo				
		Description of property		(a) Cost or other (Investme)		(b) Cost or other b (other)	asıs	Accumulated (c)depreciation		a)Bool	k value
1 a	Land										
b	Buildin	ıgs									
c	Leasel	nold improvements				6,862	,598	4,439,92	.0	2	2,422,678
d	Equipn	nent				6,559	,552	4,886,92	.7	1	,672,625
_	Other			1		1 400	000	10477	- 1		F 370

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

4,100,581

See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	′	(b) Book value		(c)Method of valuation ost or end-of-year market val
1)Financial derivatives		4,243,		F
2)Closely-held equity interests 3)Other				
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	4,243,	058	
Investments—Program Related. Complete if the organization answered	d 'Yes' on Form 9	90, Part IV, line 11c	·See For	m 990, Part X, line 13.
(a) Description of investment		(b) Book value		(c) Method of valuation ost or end-of-year market val
				year market var
			I .	
		n Form 990, Part IV, lı	ne 11d Se	e Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, li	ne 11d Se	
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, lı	ne 11d Se	
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, li	ne 11d Se	
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, lı	ne 11d Se	
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, li	ne 11d Se	
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, li	ne 11d Se	
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, li	ne 11d Se	
Part IX Other Assets. Complete if the organization	on answered 'Yes' o	n Form 990, Part IV, li	ne 11d Se	
Other Assets. Complete if the organization (a) Described (on answered 'Yes' o			(b) Book value
Other Assets. Complete if the organization (a) Description (a) Description (a) Description (b) Description (b) Must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization (b) Description (c) Descripti	on answered 'Yes' o	ed 'Yes' on Form 99		(b) Book value
Other Assets. Complete if the organization (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization (b) must equal Form 990, Part X, line 25.	on answered 'Yes' o	ed 'Yes' on Form 99		(b) Book value
Other Assets. Complete if the organization (a) Description otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of See Form 990, Part X, line 25. (a) Description of liability	on answered 'Yes' o	ed 'Yes' on Form 99		(b) Book value
Other Assets. Complete if the organization (a) Description of lability Otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of lability Capacital income taxes	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Other Assets. Complete if the organization (a) Description of lability Otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of lability Capacital income taxes	15) janization answer	ed 'Yes' on Form 99		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. (a) Description of liability	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Other Assets. Complete if the organization (a) Description of labelity Otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of labelity (a) Description of liability	15) janization answer	ed 'Yes' on Form 99		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. (a) Description of liability	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Other Assets. Complete if the organization (a) Description of labelity Otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of liability ederal income taxes	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability Federal income taxes	15) janization answer	ed 'Yes' on Form 99		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25.	15) ganization answer (b) Book val	ed 'Yes' on Form 99		(b) Book value

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) .

Net unrealized gains (losses) on investments . . .

Donated services and use of facilities .

Recoveries of prior year grants . . .

Other (Describe in Part XIII)

Add lines 2a through 2d .

Subtract line 2e from line 1 .

Schedule D (Form 990) 2015

1

2

3

3

b

c

а

71,541,674

556,377

70,985,297

3,110,823

175,050

71,250,003

71,074,953

а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		175,050		
b	Other (Describe in Part XIII)	4b				
c	Add lines 4a and 4b				4c	175,05
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line	12)		[5	71,160,34
Part	Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered 'Yes' on Form 990, F				s per	Return.
1	Total expenses and losses per audited financial statements				1	74,185,77
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
c	Other losses	2 c				
d	Other (Describe in Part XIII)	2d		3,110,823		

2a

2b

2c

2d

-1.797.961

2,354,338

2e

3

2e

3

4c

175,050

Other (Describe in Part XIII) . . .

Add lines 2a through 2d .

Subtract line 2e from line 1 .

Add lines 4a and 4b . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Return Reference

OTHER REVENUE INCLUDED ON SCHEDULE D, PART XI, LINE 2D NET REVENUE OF AFFILIATES INCLUDED IN CONSOLIDATED BOOKS BUT NOT ON RETURN FINANCIAL STATEMENTS \$2,354,338

Explanation

Schedule I
(Form 990)

Grants and C
Governments

Complete if the organize

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Department of the

Internal Revenue Service

Treasury

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

OMB No 1545-0047

DLN: 93493319024526

2015

Open to Public Inspection

Schedule I (Form 990) 2015

Name of the organization	Employer identification number						
NATIONAL CABLE & TELECOMMUNI	CATIONS ASSUC					53-0222396	
Part I General Information	n on Grants and	Assistance				•	
 Does the organization maintain rethe selection criteria used to awa Describe in Part IV the organization 	ard the grants or ass tion's procedures fo	r monitoring the use	of grant funds in the Un	ited States			∏Yes ↓√ N
Part II Grants and Other Assistanthat received more than \$				plete if the organization	answered "Yes" on Fo	orm 990, Part IV, line 21	l, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							
2 Enter total number of section 50	1(c)(3) and governn	nent organizations lis	ted in the line 1 table .				56
3 Enter total number of other organ	nizations listed in the	e line 1 table . .				•	22

Cat No 50055P

Part IV Supplementa	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.										
Return Reference	Explanation										
Cabadala I Baat I Laa 3	THE ORGANIZATION BOECH	OT HIGH ALLY MAKE COA	NE DAYMENES ES SEU	ED ODGANIZATIONS OF IN	DIVIDUAL C. ALL AMOUNT C. DAID						

Schedule I, Part I, Line 2 THE ORGANIZATION DOES NOT USUALLY MAKE GRANT PAYMENTS TO OTHER ORGANIZATIONS OR INDIVIDUALS ALL AMOUNTS PAID DURING 2015 WERE IN THE FORM OF CONTRIBUTIONS, SPONSORSHIPS OR OTHER TRANSFERS TO ORGANIZATIONS AND INDIVIDUALS

Additional Data

(a) Name and address of

Software ID: Software Version:

(c) IRC section

(b) EIN

EIN: 53-0222396

Name: NATIONAL CABLE & TELECOMMUNICATIONS ASSOC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

organization or government		ıf applıcable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
Technology Policy Institute 1099 New York Ave NW Suite 520 Washington, DC 20001	20-5835776	501(c)(3)	250,000		N/A	N/A	2015 General Support
The Mercatus Center Inc 3434 Washington Blvd 4th Floor Arlington, VA 22201	54-1436224	501(c)(3)	150,000		N/A	N/A	Support 2015 Tech Policy Program
The Free State Foundation Inc PO Box 60680 Potomac,MD 20859	74-3160646	501(c)(3)	120,000		N/A	N/A	General Support 2015

(d) Amount of cash (e) Amount of non- (f) Method of valuation

(h) Purpose of grant

(g) Description of

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) N/A 52-1629221 501(c)(3) 100,000 IN/A General Support 2015 Third Way Foundation 1200 New Hampshire Ave NW 575

Washington, DC 20036					
The Advertising Council Inc 815 Second Avenue 9th Floor New York,NY 10017	13-0417693	501(c)(3)	72,350	N/A	2015 An Sponsors Service A

1101 K Street NW Suite 610 Washington, DC 20005

nnual orship & Public A wards Di N/A N/A ITIF (The IT & Innovation 20-4403497 501(c)(3) 52,500 General Support 2015 Foundation)

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) N/A 13-1084135 501(c)(3) 50,000 N/A General Support 2015 NAACP Washington Bureau 1156 15th Street NW Suite 915 al Support 2015

IN/A

N/A

General Support 2015

Washington, DC 20005						
New York Law School 185 West Broadway New York, NY 10013	13-5645885	501(c)(3)	50,000	N/A	N/A	General

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

Institute for Liberty 20-2641983

1250 Connecticut Ave NW

Washington, DC 20036

Suite 20

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) TechFreedom 27-3567814 501(c)(3) 50,000 IN/A N/A General Support 2015 110 Maryland Ave NE Suite 409

Economics

3333 NE Sandy Blvd 207 Portland, OR 97232

Washington, DC 20002						
Americans for Tax Reform 722 12th Street NW Fourth Floor Washington, DC 20005	52-1403587	501(c)(4)	50,000	N/A	N/A	General Support 2015
International Center for Law &	27-1246620	N/A	50,000	N/A	N/A	General Support 2015-

Tech Freedom

(a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) N/A 501(c)(3) 46,230 N/A Operating Support & The Media Institute 52-1061431 2300 Clarendon Blvd Suite Banquet Sponsorship 602 Arlington VA 22201 Iall of Fame Gold

ATTITION, VA 22201						
The Cable Center 2000 Buchtel Blvd Denver, CO 80210	20-0315238	501(c)(3)	42,500	N/A		Cable Hall of Fame Gold & Bronze Tables
The Leadership Conference	23-7026895	501(c)(3)	40,000	N/A	N/A	General Support 2015

The Leadership Conference 23-7026895 501(c)(3) Education Fund

1629 K Street NW 10th Floor Washington, DC 20006

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) N/A Politic 365 LLC 90-0544495 N/A 40,000 N/A General Support 2015 250 K Street NE Suite 509 Washington, DC 20002 IN/A MMTC E2 1000677 E01/61/21 22 4 E O INI / A Broadband & Social Summit & Contribut

3636 16th Street NW Suite B-366 Washington, DC 20010	52-18606//	301(0)(3)	33,430	IN/A		Justice S MMTC C
Congressional Black Caucus	52-1160561	501(c)(3)	32,413	N/A	N/A	2015 An

1720 Massachusetts Ave NW Washington, DC 20036

nnual Conf Foundation Inc.

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) N/A Fight for Children Inc 52-1706059 501(c)(3) 32,000 N/A Fight for Children 1726 M Street NW Suite 202 campaign donation W------ DC 2002C Support 2015

Gala

washington, DC 20036						
Center Forward 325 7th Street NW Suite 400 Washington, DC 20004	27-2429741	501(c)(4)	30,000	N/A	N/A	General Support 2015
Congressional Hispanic	52-1114225	501(c)(3)	28,600	N/A	N/A	CHCI Annual Awards

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Caucus Institute 1128 16th Street NW Washington, DC 20036

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A NewBay Media 01-0873862 N/A 28,500 IN/A Hall of Fame & Wonder 28 Fast 28th St Women Sponsorships New York, NY 10016 m Policy

National Urban League 120 Wall St 8th Floor New York, NY 10005	13-1840489	501(c)(3)	25,000	N/A		Telecomm Policy Advocacy
Third Way	20-1734070	501(c)(4)	25,000	N/A	N/A	General support 2015

1025 Connecticut Avenue

Washington, DC 20036

NW Suit

(a) Name and address of (b) EIN (c) IRC section (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (d) A mount of cash organization ıf applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or aovernment assistance other) 23-1352685 501(c)(3) 25,000 IN/A N/A Tech Innovation Trustees of the University of Pennsylvania Competition 3501 Sansom St Philadelphia, PA 19104 N/A League of Rural Voters 36-3494217 501(c)(4) 25,000 IN/A General Support 2015 2104 Stevens Ave S

Minneapolis, MN 55404 N/A Citizens Against Government 52-1363952 501(c)(3) 25,000 IN/A General Support 2015 Waste

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1301 Pennsylvania Avenue NW Suite

Washington, DC 20004

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 501(c)(3) 25,000 IN/A LULAC National Convention 52-2072106 IN/A General Support 2015 221 Kansas Suite 501 port 2015

N/A

Annual Conference

Sponsorships

IN/A

El Paso, TX 79901						
Americans for Prosperity 2111 Wilson Blvd Suite 350	75-3148958	501(c)(4)	25,000	N/A	N/A	General Suppo
Arlington, VA 22201						

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NAMIC Inc 84-1488263 501(c)(6) 24,500

50 Broad Street 1801

New York, NY 10004

(a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) N/A 54-1848713 501(c)(3) 23,880 IN/A 2015 Promise Night America's Promise Alliance 1110 Vermont Avenue NW Sponsorship Stute 900 Washington, DC 20005 Gala 6 0 -

YearUp NCR	04-3534407	501(c)(3)	23,000	N/A	N/A	Geek G
1901 South Bell Street Suite						Gigaby
100						
Arlington, VA 22202						

vte sponsorship

N/A T Howard Foundation 54-1712500 501(c)(3) 23,000 IN/A Diversity Award Dinner

8630 Fenton St 316 Sponsorship

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A LULAC National Office 501(c)(4) 23,000 IN/A Legislative Conf & Gala 74-6090399 221 Kansas Suite 501 El Paso.TX 79901 nature &

WICT 2000 K St NW 350 Washington, DC 20006	36-3814358	501(c)(3)	22,600	N/A		Sponsor Signature & Touchstones Luncheons
Phoenix Ctr for Adv Legal & Econ Pub Policy study 5335 Wisconsin Ave NW	52-2079266	501(c)(3)	20,000	N/A	N/A	General Support 2015

Suite 440

Washington, DC 20015

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A Center for Individual Freedom 54-1916980 501(c)(4) 20,000 N/A General Support 2015 815 King Street 303 Alexandria. VA 22314 neral support 2015

Institute for Policy Innovation 1320 Greenway Drive 820 Irving,TX 75038	75-2158093	501(c)(3)	20,000	N/A	N/A	General support 2015
University of Colorado	84-6049811	501(c)(3)	20,000	N/A	N/A	general support 2015

Foundation

401 UCB - Wolf Law Building Boulder, CO 80309

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A Alliance for Women in Media 52-1193933 501(c)(3) 18,950 IN/A general support 2015 Foundation 1250 24th St NW 300 Washington, DC 20037 rship Annual tive Conf

National Black Caucus of	52-1218832	501(c)(3)	18,200	N/A	N/A	Sponsors
State Legislators						Legislativ
444 North Capitol Street NW						
Sui						
Washington, DC 20001						

7700 East First Place Denver, CO 80230

N/A NCSI Foundation for State 74-2232576 501(c)(3) 17,772 IN/A General Support 2015 Legislatures

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) N/A National Conference of State 84-0772595 Sec 170(c)1 16,864 N/A Sponsor Professional Develop Seminar Legislatures 7700 East First Place D ----- CO 00220

Denver, CO 80230					
A Philip Randolph Institute 815 16th Street NW 5th Floor Washington, DC 20006	13-2548181	501(c)(3)	15,000	N/A	Sponsor 2015 Nat' Education Conf

N/A National Gay & Lesbian 13-4219714 501(c)(6) 15,000 IN/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

729 15th Street NW 9th Floor Washington, DC 20005

Sponsor 2015 National Chamber of Commerce Dinner

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 26-3835257 501(c)(3) 15,000 IN/A N/A Tracy's Kids 7th Tracy's Kids Inc 5509 Devon Road Annual Red Carpet Bethesda, MD 20814 Event I Support 2015

National Black Chamber of Commerce 4400 Jenifer St NW Suite 331 Washington, DC 20015	35-1889294	501(c)(3)	15,000	N/A	N/A	General Support 2015
National Congress of Black Women Inc	52-1436163	501(c)(3)	15,000	N/A	N/A	General Support 2015

1250 Fourth Street SW Suite WG-1

Washington, DC 20024

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 57-0952531 501(c)(3) 15,000 IN/A N/A State Policy Network 2015 Annual Meeting & 1655 N Ft Myer Drive Suite Tech Pol Work Group 360 Arlington VA 22200 egislators

Arington, VA 22209					
Nat'l Hispanic Caucus of State Legislators 444 North Capitol Street NW Sui	84-1168319	501(c)(3)	15,000	N/A	2015 Leg Summit
Sui I					

15,000

IN/A

N/A

Technology &

Democracy Program

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Washington, DC 20001

91-1521697

Discovery Institute

Seattle, WA 98104

208 Columbia Street

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Madery Bridge Associates 46-2895004 N/A 15,000 IN/A N/A General Support 2015 LLC 9201 Warren Parkway Gala Sponsorship

Frisco,TX 75035					
N Street Village Inc 1333 N Street NW Washington, DC 20005	52-1007373	501(c)(3)	13,600	N/A	N/A
FCBA Foundation	51-0334407	501(c)(3)	11.753	N/A	N/A

325

Washington, DC 20036

General Support 2015 301(0)(3) 1020 19th Street NW Suite

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A Latinos in Info Sciences & 20-1724165 501(c)(3) 10.000 N/A General Support 2015 Technology Assn 5943 Jimmy Carter Blvd Norcross, GA 30071 ort 2015

Emma L Bowen Foundation 30 Rockefeller Center Campus 1221 New York, NY 10112	22-2635292	501(c)(3)	10,000	N/A	N/A	General Support 2015
Small Business & Entrepreneurship Council	36-3756240	501(c)(4)	10,000	N/A	N/A	General Support 2015

301 Maple Avenue West Suite

Vienna, VA 22180

100

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) US Hispanic Chamber of 43-1249249 501(c)(6) 10,000 IN/A N/A General Support 2015 Commerce 1424 K Street NW Suite 401 Washington, DC 20005 Support 2015

Support 2015

Taxpayers Protection Alliance 108 N Alfred Street Lower Level	45-0702828	501(c)(4)	10,000	N/A	N/A	General S
Alexandria,VA 22314						
American Commitment	45-2600535	501(c)(4)	10,000	N/A	N/A	General S

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1300 Pennsylvania Ave NW

Washington, DC 20004

190-40

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) American Council of Young 52-0845718 501(c)(3) 10.000 N/A N/A General Support 2015 Political Leaders 2131 K Street NW Suite 400 2015

Support

Washington, DC 2003/						
Labor Counc for Latin American Advancement 815 16th Street NW 3rd Floor Washington, DC 20006	52-1002207	501(c)(3)	10,000	N/A	N/A	General Support 20
National Pijerto Rican	52-1164571	501(c)(3)	10.000	N/A	N/A	Telcom Public Poli

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Coalition Inc.

1220 L St NW 701 Washington, DC 20005

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) N/A Susan G Komen 75-1835298 501(c)(3) 10,000 N/A Honoring the Promise 5005 LBJ Freeway 250 Gala Sponsorship Dallac TV 75344 Spring Benefit rship

Dallas, IX /3244						
Bay Area Cancer Connections 2335 El Camino Real Palo Alto, CA 94306	77-0417605	501(c)(3)	10,000	N/A		Annual Spring Benefit Sponsorship
National Org of Black Elected	95-4546966	501(c)(3)	10,000	N/A	N/A	General Support 2015

Legislative 20 F St NW Ste 700 Washington, DC 20001

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) N/A N/A 10,000 IN/A Hispanic Technology & 46-4002029 General Support 2015 Telecom Partnership 1220 L St NW 701 Washington, DC 20005 N/A ncına 13-3619000 501(c)(3) 9,610 IN/A A merican Courage A wards Sponsorship

9,000

N/A

Annual Gala 2015

IN/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

52-1429544

Asıan American Advancı
Justice
1620 L St NW 1050
Washington, DC 20036

Prevent Cancer Foundation

1600 Duke Street 500 Alexandria, VA 22314

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) 22-2882549 501(c)(3) 8,850 IN/A N/A Idealism in Action Gala City Year Washington DC 1875 Connecticut Ave NW Sponsorship Suite 113 Washington DC 20009 Support 2015

& Human Rights

Washington, DC 20003						1
WICT Washington DCBaltimore Chapter 2511 Cliffbourne PINW Apt B Washington, DC 20009	36-3550533	501(c)(3)	8,750	N/A	N/A	General Support 2015
The Leadership Conference	52-0789800	501(c)(4)	8,750	N/A	N/A	Convene Coalition Civil

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Education Fund

1629 K Street NW 10th Floor Washington, DC 20006

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) N/A 52-1866840 501(c)(3) 8,500 N/A The National Association of Service to America A wards Dinner Sponsor Broadcasters 4 7 7 4 NI Charact NIM

7.750

N/A

Sponsorship Hispanic

Federation Gala

IN/A

Washington, DC 20036						
Competitive Enterprise Institute	52-1351785	501(c)(3)	8,120	N/A	N/A	2015 CEI Dinner

Washington, DC 20036

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

13-3573852

Hispanic Federation Inc.

New York, NY 10005

55 Exchange Place 5th Floor

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) N/A National Press Foundation 52-1069481 501(c)(3) 6,550 N/A NPF Annual Awards 1211 Connecticut Ave NW Dinner Sponsorship Suite 310 Sponsorship

Washington, DC 20036						
NAMIC Mid-Atlantic Inc 50 Broad Street 1801 New York, NY 10004	91-2001722	501(c)(6)	5,150	N/A	N/A	Platinum Sponsorship
NCTA EDUCATION	52-1653760	501(c)(3)	1,250,000	N/A	N/A	General Support 2015

FOUNDATION INC. 25 Mass Ave NW 100 Washington, DC 20001 efile GRAPHIC print - DO NOT PROCESS As Filed Data -

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990)

Department of the

Treasury

Compensation Information

Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

For certain Officers, Directors, Trustees, Key Employees, and Highest

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493319024526

2015

Open to Public Inspection

	al Revenue Service						
Na	ne of the organization IONAL CABLE & TELECOMMUNICATIONS ASSOC			Employer identification	on nur	nber	
IVAI	IONAL CABLE & TELECOMMONICATIONS ASSOC			53-0222396			
Pa	rt I Questions Regarding Compensation						
						Yes	No
La	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to						
	▼ First-class or charter travel	Г	Housing allowance or residence fo	r personal use			
	Travel for companions		Payments for business use of pers	onal residence			
	√ Tax idemnification and gross-up payments	Г	Health or social club dues or initia	tion fees			
	Discretionary spending account	Г	Personal services (e g , maid, chai	uffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement or provision of all of the expenses desc				1b	Yes	
2	Did the organization require substantiation prior to reim directors, trustees, officers, including the CEO/Execution				2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that used by a related organization to establish compensation	apply	Do not check any boxes for metho	ds			
	Compensation committee	~	Written employment contract				
	Independent compensation consultant	~	Compensation survey or study				
	Form 990 of other organizations	~	Approval by the board or compens	ation committee			
1	During the year, did any person listed on Form 990, Pa or a related organization	rt V I	I, Section A, line 1a with respect to	the filing organization			
а	Receive a severance payment or change-of-control pay	ymen	t?		4a		No
b	Participate in, or receive payment from, a supplementa	Inon	qualified retirement plan?		4b	Yes	
c	Participate in, or receive payment from, an equity-base	d coi	mpensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	de th	e applicable amounts for each item	n Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ns mı	ust complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line compensation contingent on the revenues of \ensuremath{II}	ne 1a	a, did the organization pay or accrue	any			
а	The organization?				5a		
b	Any related organization?				5b		
	If "Yes," on line 5a or 5b, describe in Part III						
5	For persons listed on Form 990, Part VII, Section A, line compensation contingent on the net earnings of	ne 1a	a, did the organization pay or accrue	any			
а	The organization?				6 a		
b	Any related organization?				6b		
	If "Yes," on line 6a or 6b, describe in Part III						
7	For persons listed on Form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," described in lines 5 and 6.			on-fixed	7		
3	Were any amounts reported on Form 990, Part VII, pair subject to the initial contract exception described in Rein Part III				8		
9	If "Yes" on line 8, did the organization also follow the resection 53 $4958-6(c)$?	ebutt	able presumption procedure describ	ed in Regulations	9		

Cat No 50053T

Schedule J (Form 990) 2015

ruge Z									
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.									
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual									
(A) Name and Title	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in					

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	-	(ii)	(ıiı)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base (1) compensation	Bonus & incentive	Other reportable	compensation			as deferred on prior
· ·	(i) compensation	compensation	compensation				Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

Schedule J (Form 990) 2015

Page 2

Schedule J (Form 990) 2015						
Part III Supplemental Information						
Provide the information, explanation, or	r descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation					
Retain Reference	Explanation					

THE INDIVIDUALS LISTED PARTICIPATE IN A DEFERRED COMPENSATION AGREEMENT ADMINISTERED BY NCTA

Schedule J (Form 990) 2015

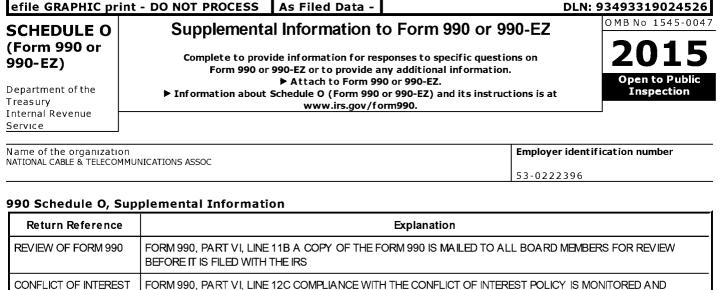
SCHEDULE J, PART I, LINE 4B

Software ID: Software Version:

EIN: 53-0222396

Name: NATIONAL CABLE & TELECOMMUNICATIONS ASSOC

Form 990, Schedule J, (A) Name and Title	. 416		f W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1MICHAEL K POWELL PRESIDENT & CEO	(1)	3,077,781	1,000,000	42,617	500,000	24,804	4,645,202	0
	(11)	0	0	0	0	- 0	_ 0	
1JAMES M ASSEY JR Executive Vice President	(1)	861,160	360,436	1,607	217,500	24,540	1,465,243	170,000
	(11)	0	0	0	0		-	
2BARBARA YORK SR VP , Industry Affairs	(1)	619,293	181,552	4,268	65,000	20,720	890,833	61,000
SIX VF , Illidustry Alfalis	(11)	0	0	0	0			
3ELEANOR WINTER SR VP , Special Projects	(1)	596,001	155,322	1,445	50,000	20,720	823,488	50,000
	(11)	0	0	0	0			
4RITA LEWIS SR VP , GOVERNMENT	(1)	583,320	216,648	773	80,000	17,343	898,084	76,000
RELATIONS	(11)	0	0	0	0	0	0	
5RICK CHESSEN SR VP , LAW & REGULATORY	(1)	626,100	171,487	773	60,000	20,378	878,738	51,000
POL	(11)	0	0	0	0	0	_ 0	
6 JADWIGA JANUCIK SR VP , ASSOCIATION	(1)	457,627	150,322	2,218	50,000	17,343	677,510	50,000
AFFAIRS	(11)	0	0	0	0	-	-	
7 NEAL GOLDBERG VP & GENERAL COUNSEL	(1)	423,100	165,322	4,268	50,000	20,686	663,376	50,000
	(11)	0	0	0	0	- 0	- 0	
8BRUCE CARNES SR VP , FINANCE & ADMIN	(1)	394,940	156,487	6,922	55,000	20,672	634,021	52,000
	(11)	0	0	0	0	- 0	- 0	
9ROBERT STODDARD SR VP COMM & PUBLIC	(1)	395,111	150,322	2,218	50,000	20,720	618,371	50,000
AFFAIRS	(11)	0	0	0	0	-	-	
10JILL LUCKETT SR VP, PROG NETWORK	(1)	392,754	150,322	1,445	50,000	24,540	619,061	50,000
POLICY	(11)	0	0	0	0	-	- 0	
11WILLIAM CHECK CTO & SR VP , SCIENCE &	(1)	390,204	150,322	1,445	50,000	24,158	616,129	50,000
TECH	(11)	0	0	0	0	-	-	
12DIANE BURSTEIN VP & DEPUTY GENERAL	(1)	324,185	148,289	1,445	45,000	20,720	539,639	45,000
COUNSEL	(11)	0	0	0	0	-	-	
13MICHAEL SCHOOLER VP & DEPUTY GENERAL	(1)	362,380	148,289	4,268	45,000	9,624	569,561	45,000
COUNSEL	(11)	0	0	0	0			
14Khristian Snowden Chief of Staff	(1)	614,802	115,869	504	60,000	9,921	801,096	32,000
Cinel of Staff	(11)	0	0	0	0			
						0	0	



ENFORCED AT THE ORGANIZATION'S BOARD MEETINGS.

POLICY

990 Schedule O, Supplemental Information

Return Reference

COMPENSATION OF TOP	FORM 990, PART VI, LINES 15a & 15b TOP MANAGEMENT, OFFICERS, AND KEY EMPLOYEES UNDERGO AN
MANAGEMENT,	ANNUAL PERFORMANCE REVIEW ON THE FIRST OF THE YEAR, WHICH INCLUDES A REVIEW OF THE INDIVIDUAL'S
OFFICERS, AND KEY	COMPENSATION THE ORGANIZATION'S BOARD OF DIRECTORS MUST REVIEW AND APPROVE THE
EMPLOYEES	COMPENSATION OF THE PRESIDENT & CEO THE ANNUAL COMPENSATION ADJUSTMENTS FOR ALL OTHER
	STAFF IS REVIEWED BY THE PRESIDENT & CEO. THE ORGANIZATION ALSO USES SALARY SURVEYS TO

Explanation

ENSURE THAT COMPENSATION AMOUNTS ARE WITHIN GUIDELINES FOR ALL EMPLOYEES. DOCUMENTS AVAILABLE FORM 990. PART VI. LINE 19 THE ORGANIZATION PROVIDES ITS GOVERNING DOCUMENTS. CONFLICT OF TO THE PUBLIC INTEREST POLICY, AND FINANCIAL STATEMENTS TO THE PUBLIC UPON REQUEST

990 Schedule O, Supplemental Information

MEMBERS' ROLE IN	FORM 990, PART VI, LINES 6, 7A and 7B Each System and Programmer Member in good standing shall be entitled to	l
GOVERNING BODY	vote at all meetings of NCTA and on matters transacted by mail ballot. Associate Members shall not be entitled to vote on	ĺ
OF ORGANIZATION	NCTA business Each System Member shall be entitled to cast one vote for each \$1,000 of dues paid, or part thereof for	ı

Organization will enter into, among the many other decisions that they make

Return Reference

the four-quarter period ending with the last day of the quarter which precedes the quarter in which the meeting is held or a ballot by mail is taken. The officers of the Organization, including the Chairman, Secretary, Treasurer, and Past-Chairman make decisions including, but not limited to, approving the operating budget, spending directly from the fund balance for major programs outside of the approved operating budget, and for any major media campaigns the

Explanation

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493319024526 OMB No 1545-0047

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

Open to Public Inspection

Schedule R (Form 990) 2015

Department of the Treasury Internal Revenue Service

SCHEDULE R

(Form 990)

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Cat No 50135Y

Name of the organization **Employer identification number**

NATIONAL CABLE & TELECOMMUNICATIONS ASSOC 53-0222396 Part I Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (b) (d) (f) (e) Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state Total income Primary activity End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (c) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)NCTA EDUCATION FOUNDATION INC EDUCATIONAL DC 501(C)(3) NCTA No 25 MASSACHUSETTS AVE NW 100 WASHINGTON, DC 20001 52-1653760 (2) THE WALTER KAITZ FOUNDATION DIVERSITY DC 501(C)(3) NCTA No 25 MASSACHUSETTS AVE NW 100 WASHINGTON, DC 20001 94-2666764

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990,	Part IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	alloca	ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	part	ral or aging ner?	(k) Percentage ownership
				,			Yes	No		Yes	No	
	_	_				l.	' .					

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		١								
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		1								
2. Descript of (i) interest, (ii) applying of (iii) revelting or (iii) reput from a controlled optity										
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		ı								
b Gift, grant, or capital contribution to related organization(s)	Yes									
c Gift, grant, or capital contribution from related organization(s)		ı								
d Loans or loan guarantees to or for related organization(s)		ı								
e Loans or loan guarantees by related organization(s)										
f Dividends from related organization(s)		ı								
g Sale of assets to related organization(s)		ı								
h Purchase of assets from related organization(s)		ı								
i Exchange of assets with related organization(s)		ı								
j Lease of facilities, equipment, or other assets to related organization(s)		١								
k Lease of facilities, equipment, or other assets from related organization(s)	\dashv	ı								
Performance of services or membership or fundraising solicitations for related organization(s)		١								
m Performance of services or membership or fundraising solicitations by related organization(s)		ı								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes									
o Sharing of paid employees with related organization(s)	Yes									
p Reimbursement paid to related organization(s) for expenses	+	1								
q Reimbursement paid by related organization(s) for expenses	Yes									
r Other transfer of cash or property to related organization(s)	+	1								
s Other transfer of cash or property from related organization(s)		ı								
If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds										
(a)(b)(c)(d)Name of related organizationTransaction type (a-s)Amount involved type (a-s)Method of determining amount involved Method of determining amount involved	volved									

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships														
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No		
												1 1		
	•			-										

